

Application Data Sheet

Application Information

Application Number::
Filing Date::
Application Type:: **US National Phase**
Subject Matter:: **Utility**
Suggested Classification::
Suggested Group Art Unit::
Title:: **OPTICAL FILTERING COMPONENT**
Attorney Docket Number:: **62819 (4590-353)**
Request for Early Publication::
Request for Non-Publication::
Suggested Drawing Figure::
Total Drawing Sheets:: **4**

Applicant Information

Applicant Authority Type:: **Inventor**
Primary Citizenship Country:: **French**
Status::
Given Name:: **Xavier**
Middle Name::
Family Name:: **HUGON**
Name Suffix::
City of Residence:: **Couplevie**
State or Province of Residence::
Country of Residence:: **France**
Street of Mailing Address:: **Route de Guillon, Cedex 219A**
City of Mailing Address:: **Couplevie**
Postal or Zip Code:: **38500**

Applicant Authority Type:: **Inventor**

Primary Citizenship Country:: **French**

Status::

Given Name:: **Jean-Pierre**

Middle Name::

Family Name:: **MOY**

Name Suffix::

City of Residence:: **Saint Egreve**

State or Province of Residence::

Country of Residence:: **France**

Street of Mailing Address:: **15, Rue de la Monta**

City of Mailing Address:: **Saint Egreve**

Postal or Zip Code:: **38120**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	French
Status::	
Given Name::	Romain
Middle Name::	
Family Name::	RAMEL
Name Suffix::	
City of Residence::	Saint Egreve
State or Province of Residence::	
Country of Residence::	France
Street of Mailing Address::	L'Orangerie 2, Rue de Néron
City of Mailing Address::	Saint Egreve
Postal or Zip Code::	38520

Correspondence Information

Correspondence Customer No:: **33308**
Phone Number:: **(703) 684-1111**
Fax Number:: **(703) 518-5499**
E-Mail Address::

Representative Information

Representative Customer Number::

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
FR	02/06853	June 4, 2002	Yes

Assignee Information

Assignee Name:: **ATMEL GRENOBLE S.A.**
Street of Mailing Address:: **Avenue de Rochepleine**
City of Mailing Address:: **Saint Egreve**
State of Mailing Address::
Country of Mailing Address:: **France**
Postal or Zip Code:: **38120**